Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

(SLL-628

CLAIMS AS FILED - PART I							•	SMALL ENTITY			OTHER THA		
TOTAL CLAIMS			(Column 1)		(Column 2)			TYPE		OR	OTHER THAN OR SMALL ENTITY		
			23					RATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			23 minus 20=		. 3			X\$ 9=	27	OR	X\$18=		
	DEPENDENT C		/ minus 3 =		*			X40=	~ 1	1	X80=		
M	JLTIPLE DEPE	NDENT CLAIM P	RESENT				}		 	OR			
* 11	f the difference	e in column 1 is	less than z	ero, enter	"0" in d	column 2		+135=		OR	+270=		
		CLAIMS AS A						TOTAL	382	OR	TOTAL		
		(Column 1)	WILITOLI	(Colun		(Column 3)		SMALL	ENTITY	OR	OTHER SMALL I		
AMENDMENT A		CLAIMS REMAINING		HIGH NUME	EST		Г		ADDI-	ا ٔ ۱		ADDI-	
		AFTER AMENDMENT		PREVIC PAID I	USLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent FIRST PRESE	* ENTATION OF MU	Minus	***	CI AIA	=		X40=		OR	X80=		
			DETIF LE DEF	CINDENT	CLAIM		T	+135=		1 1	+270=		
							L	TOTAL		OR	TOTAL		
		(Column 1)		(Colum	n 0\	(Cal.,	Αſ	ODIT. FEE		OR ,	ADDIT. FEE		
В		CLAIMS	Total Control	HIGHE		(Column 3)	_						
AMENDMENT E		REMAINING AFTER		NUME PREVIO	USLY	PRESENT EXTRA	1	RATE	addi- Tional		RATE	ADDI- TIONAL	
	Total	*	Minus	PAID F	OR		-		FEE			FEE	
	Independent	*	Minus	**		=	L	X\$ 9=		OR	X\$18=		
Ā		NTATION OF MU			CLAIM		L	X40=		OR	X80=		
								+135=		OR	+270=		
							45	TOTAL		OR ,	TOTAL		
		(Column 1)		(Colum	n 2)	(Column 3)	AL	DIT. FEE		μ μ	DDIT. FEE		
ᇎᅡ		CLAIMS REMAINING		HIGHE	ST				ADDI				
		AFTER AMENDMENT		PREVIO	JSLY	PRESENT EXTRA	1	RATE	ADDI- FIONAL		RATE	ADDI- TIONAL	
	Total		Minus	PAID F	ОН	=	+		FEE	L		FEE	
	Independent		Minus	***		_	L	X\$ 9=		OR	X\$18=		
4	FIRST PRESE	NTATION OF MU	LTIPLE DEP	ENDENT (I CLAIM			X40=		OR	X80=	I	
					·		+	·135=		OR	+270=		
11	the highest Nun	nn 1 is less than the nber Previously Paid	d For" IN THIS	SPACE is I	ace than	20 00101 100 7	L	TOTAL		L	TOTAL		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number of words."										OR A	DDIT EEE		
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											I		

UNITED STATES PATENT & TRADEMARK OFFICE Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND									
1 Date of Request: 10-19-01 2 Serial/Patent # 09/896, 520									
3 Ple	ease refund the following fee(s):	4 PAPER NUMBER		5 DATE FILED	6 AMOUNT				
	Filing				\$				
	Amendment				\$				
	Extension of Time				\$				
	Notice of Appeal/Appeal				\$				
X	Petition	3		9/28/01	\$ 13000				
	Issue				\$				
	Cert of Correction/Terminal Disc.				\$				
	Maintenance				\$				
	Assignment				\$				
	Other				\$				
		7 TOTAL AMOUN OF REFUND		MOUNT UND	\$13000				
		8 TO BE REFUNDED BY:							
10 REA	ASON:	Treasury Check							
	Overpayment	Credit Deposit A/C #:							
	Duplicate Payment	, 501/33							
VI	No Fee Due (Explanation):								
Unnecessary									
11 REFUND REQUESTED BY:									
TYPED/PRINTED NAME: WAN VAYMON TITLE: paralegal									
SIGNATURE:PHONE:									
OFFICE:									
THIS SPACE RESERVED FOR FINANCE USE ONLY:									
APPROVED: (Ilica Kelle DATE: 10-23-0/									

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance Refund Branch Crystal Park One, Room 802B